FREE *Perfect Escape* STEMWARE SET ORDER FORM

with pack proofs of purchase from Parliament Lights.

Here's how easy it is to order your 6-piece Perfect Escape Stemware Set:

1. Fill out this original order form completely. Copies of order forms will not be accepted. **Order will be rejected if your signature and birth date are not provided.**
2. Include the appropriate number of Parliament pack proofs of purchase. (See sample at right.) Carton UPC's not accepted. Excess UPCs will not be returned.
3. See chart at right for shipping/handling fees. Include check or money order made payable to: Parliament Lights.
4. Detach this order form and place in the enclosed reply envelope with a check or money order for shipping and handling (no cash, please), plus the correct number of pack UPC's. Check with post office to ensure you've affixed proper postage to the enclosed envelope. Allow 10–12 weeks for delivery.
5. **Offer expires and orders must be received by 2/28/98.**
6. **Limit: One 6-piece Stemware Set per person. One Set of 4 glasses per person.**
7. **Send orders to: Parliament Lights Perfect Escape Stemware Set Offer**
   PO Box 8323
   Dover, DE 19905-8323

VOID

Sample UPC

Indicate which items you are ordering by completing below:

Item	Quantity Ordered	Pack UPC's Per Item	Total Pack UPC's Submitted	Shipping & Handling Total
6-Piece Stemware Set	1	125		$4.50
Set of 4 Glasses	1	50		$2.00
Total Pack UPC's				
Shipping and Handling				$

Limit: One 6-piece Stemware Set per person. One Set of 4 glasses per person.

If name and address are different than shown, please complete:

Name _____

Address _____

City _____ State _____ Zip _____

By participating in this offer and signing below, I certify that I am a smoker under 21 years of age or older. I am also willing to receive coupons via postcard and bounded electronic items in the mail, subject to applicable state and federal laws.

Signature (required): X _____ Today's Date ___/___/___

Birth Date (required): ___/___/___ Phone ( ) _____

Offer limited to smokers 21 years of age or older. Not responsible for lost, late, misdirected, mutilated or postage-due mail. Offer good only in U.S.A. Offer void in Hawaii and where otherwise restricted or prohibited by law. No group or organization orders will be honored. Offer void to employees of Philip Morris and its advertising agencies. Postage rates vary according to the weight of your envelope. Please check with post office to ensure you've affixed proper postage. If we are precluded at any time by the Postal Service accepting your order, we will return your UPCs and shipping & handling charges.

REF: Y

XXXXXXXXXXXXXXX

Sample A. Sample
123 Any Street
Anytown, US 12345-6789

2061140181

2061140181

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT No. 23 LONDON KY

POSTAGE WILL BE PAID BY ADDRESSEE

SMOKERS SURVEY
PO BOX 666353
LONDON KY 40743-9983

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

COUPON OFFER. Limit: One coupon per purchase. Not to be transferred, sold or reproduced. Not redeemable at retail. Any other use constitutes fraud. Limited to smokers 21 years of age or older. Participation is the prerogative of the retailer. Offer good only in U.S.A. Consumer pays any sales tax.

REFUND: Philip Morris will reimburse you the face value of this coupon plus 8¢ handling and postage provided you and the consumer have complied with the terms hereof. Void when submitted by retailer and agent. Invoices showing purchases sufficient to cover all coupons must be shown upon request. Void where prohibited, taxed or restricted. Cash value 1/20¢. Redeem by mailing to: Philip Morris U.S.A. CMS Dept. #23200, 1 Parrott Drive, Dell Rio, Texas 78840 ©1997 Philip Morris Inc.

5 28200 71082 1 (8100)0 07116

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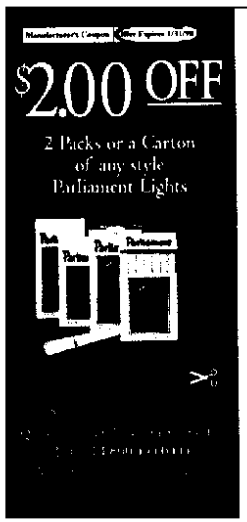


PASS THIS ALONG TO A FRIEND

We'd like to send you special offers. That's why we asked your friend to share this survey with you. Please take a few minutes to complete and return it to be eligible for additional offers. This survey is for smokers aged 21 and over. Thanks for your help!

Please print information below:

☐ Mr. ☐ Mrs. ☐ Ms. Phone: _____

Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Forwarding Service Requested

XXXXXXXXXXXXXXXX
Sample A. Sample
123 Any Street
Anytown, US 12345-6789

1. What is your regular brand of cigarette (the brand you smoke most often)?

_____

2. Is your regular brand: (Check one)
☐ Regular/King Size ☐ 100's ☐ 120's

3. Is your regular brand: (Check one)
☐ Menthol ☐ Non-Menthol

4. Is your regular brand: (Check one)
☐ Lowest Tar/Tar ☐ Mid/Extra Low Tar
☐ Light/Mild ☐ Medium ☐ Full Flavor

5. What Rate was your previous brand?

_____

6. If your regular brand was not available, which of the following brands would you consider trying?
Check all that apply.

☐ Alpine	☐ Lark	☐ Monarch	☐ Snow/Kentucky
☐ Basic	☐ Carlton	☐ Montclair	☐ Superslims
☐ Benson & Hedges	☐ Doral	☐ More	☐ True
☐ Best Buy	☐ Salt	☐ Newport	☐ Vantage
☐ Best Value	☐ Kent	☐ Now	☐ Vogue
☐ Bristol	☐ Kool	☐ Parliament	☐ Virginia Slims
☐ Bucks	☐ Magna	☐ Pyramid	☐ Winston
☐ Cambridge	☐ Marlboro	☐ Raleigh Extra	☐ Store
☐ Camel	☐ Merit	☐ Salem	☐ Other brand:
	☐ Misty	☐ Sterling	_____

7. Please list, in order, the brands of cigarettes you smoked at least one pack of in the past two weeks. How many packs did you smoke of each brand? Use as many lines as you need. Write in below the exact number of packs for each brand. Note: carton equals 10 packs.

Brand Name	# of Packs
_____	_____
_____	_____
_____	_____

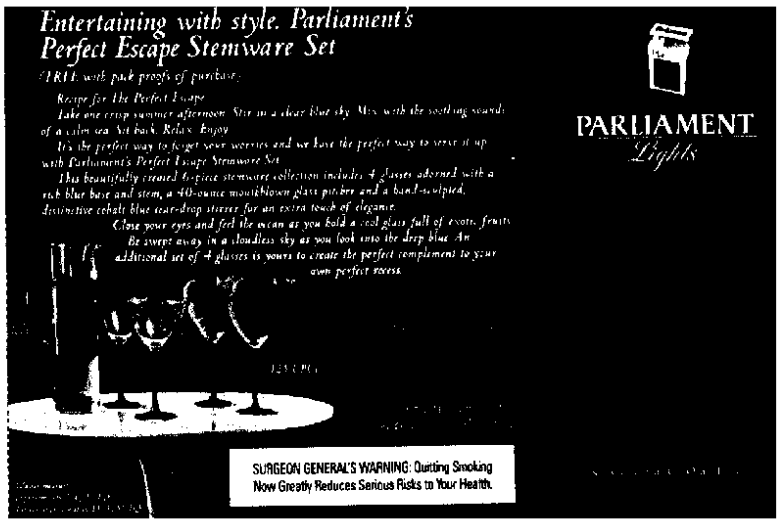
We assure you that your name will not be sold to any company that is not affiliated with Philip Morris.

By responding to this survey and signing below, I certify that I am a cigarette smoker 21 years of age or older. I also am willing to receive cigarette coupons and branded incentive items in the mail, subject to applicable state and federal laws.

Signature (required): X _____

Birth Date (required): ___/___/___ Today's Date: ___/___/___

© 1997 Philip Morris Inc.



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PLEASE
AFFIX
PROPER
POSTAGE
HERE

PROCESSING
PERFECT ESCAPE STEMWARE
ORDERS ONLY!

PARLIAMENT *Perfect Escape* STEMWARE SET
PO BOX 8323
DOVER DE 19905-8323

2061140183

PLD- 4

2061140183

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PARLIAMENT *Perfect Escape* STEMWARE SET

USE THIS ENVELOPE TO HOLD AND MAIL IN PACK PROOFS OF PURCHASE.

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